

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

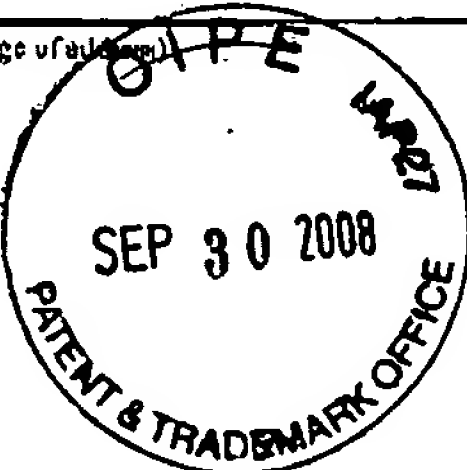
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09/22/2008

RAYMOND A. JOAO, ESQ.
 122 BELLEVUE PLACE
 YONKERS, NY 10703

10/01/2008 CCHAU2 00000155 09737348

01 FC:2501 720.00 OP
 02 FC:1504 300.00 OP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

RAYMOND A. JOAO

(Depositor's name)

Raymond A. Joao

(Signature)

SEPTEMBER 30, 2008

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09737348	12/15/2000	Raymond Anthony Joao	RJ171	85118

TITLE OF INVENTION: APPARATUS AND METHOD FOR PROCESSING AND/OR FOR PROVIDING HEALTHCARE INFORMATION AND/OR HEALTHCARE-RELATED INFORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	12/22/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
MORGAN, ROBERT W	3626	705-002000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 RAYMOND A. JOAO, ESC

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
☒ Payment by credit card. Form PTO-2038 is attached.
☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Raymond A. Joao

Date

9/30/08

Typed or printed name

RAYMOND A. JOAO

Registration No.

35,907

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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RAYMOND A. JOAO, ESQ.
122 BELLEVUE PLACE
YONKERS, NEW YORK 10703
(914) 969-2992

FAX COVER SHEET

To: The United States Patent and Trademark Office

From: Raymond A. Joao, Esq.

Date: September 30, 2008

Fax No.: 571-273-2885

No. Pages: 10 (including cover)

Re: ISSUE FEE TRANSMITTAL LETTER - U.S. Patent
Application Serial No. 09/737,348

To Whom It May Concern:


Please find transmitted herewith an ISSUE FEE TRANSMITTAL LETTER, with accompanying documents, for filing in the above-identified application.

Respectfully Submitted,

Raymond A. Joao
Reg. No. 35,907



I hereby certify that this correspondence is being transmitted via facsimile transmission to the United States Patent and Trademark Office at 571-273-2885 on September 30, 2008.


Raymond A. Joao

RJ171

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT : RAYMOND A. JOAO

SERIAL NO.: 09/737,348

FILED : DECEMBER 15, 2000

FOR : APPARATUS AND METHOD FOR PROCESSING AND/OR FOR
PROVIDING HEALTHCARE INFORMATION AND/OR
HEALTHCARE-RELATED INFORMATION

EXAMINER : R. MORGAN

GROUP : 3626

ALLOWED : SEPTEMBER 22, 2008

CONFIRMATION NO.: 8508

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

ISSUE FEE TRANSMITTAL LETTER

Sir:

Applicant submits herewith the following papers for entry in the above-identified application:

1. ISSUE FEE TRANSMITTAL FORM PTOL-85;

2. Credit Card Payment Form for \$1,020.00 for payment of the Issue Fee (\$720.00) and for payment of the Publication Fee (\$300.00);
3. Fee Transmittal Sheet (in duplicate) for the payment of the Issue Fee (\$720.00) and for the payment of the Publication Fee (\$300.00); and
4. STATEMENT OF NEW DETERMINATION OF SMALL ENTITY STATUS, FOR PAYMENT OF ISSUE FEE, PURSUANT TO 37 C.F.R. §1.27(g).

As noted above, Applicant submits herewith an ISSUE FEE TRANSMITTAL FORM PTOL-85 along with a Credit Card Payment Form for \$1,020.00 for payment of the Issue Fee of \$720.00 and for payment of the Publication Fee of \$300.00 for the above-identified application. A Fee Transmittal Sheet (in duplicate), for the payment of the Issue Fee and the Publication Fee, is also submitted herewith.


Applicant respectfully requests that the above-identified Issue Fee payment of \$720.00 be applied towards payment of the Issue Fee in the above-identified application.

Applicant also submits herewith a STATEMENT OF NEW DETERMINATION OF SMALL ENTITY STATUS, FOR PAYMENT OF ISSUE FEE, PURSUANT TO 37 C.F.R. §1.27(g). Applicant is a Small Entity and, therefore, Small Entity Status is entitled to be asserted for the above-identified application.

Please note that Applicant has filed an Amendment After Allowance Pursuant to 37 C.F.R. §1.312 in the above-identified application by First Class Certificate of Mailing on September 29, 2008.

Applicant respectfully requests that the above-identified papers and the payments of the Issue Fee and the Publication Fee be entered into the above-identified application.

Respectfully Submitted,


Raymond A. Joao
Reg. No. 35,907

September 30, 2008

Raymond A. Joao, Esq.
122 Bellevue Place
Yonkers, New York 10703
(914) 969-2992



09/30/2008 10:02 FAX 914 969 2992

RAYMOND A. JOAO

007/010

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918)

FEE TRANSMITTAL
For FY 2008☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,020.00

Complete If Known

Application Number	09/737,348
Filing Date	DECEMBER 15, 2000
First Named Inventor	RAYMOND A. JOAO
Examiner Name	R. MORGAN
Art Unit	3626
Attorney Docket No.	RJ171

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP =	x	=	
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =	x	=	
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HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): ISSUE FEE (\$720.00) & PUBLICATION FEE (\$300.00)

Fees Paid (\$)

\$1,020.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	35,907	Telephone	914-969-2992
Name (Print/Type)	RAYMOND A. JOAO	Date	9/30/08		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/17 (10-07)
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FEE TRANSMITTAL
For FY 2008

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**1,020.00**

Complete if Known

Application Number**09/737,348**

Filing Date**DECEMBER 15, 2000**

First Named Inventor**RAYMOND A. JOAO**

Examiner Name**R. MORGAN**

Art Unit**3626**

Attorney Docket No.**RJ171**

METHOD OF PAYMENT (check all that apply)

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☐ Deposit Account Deposit Account Number: Deposit Account Name:

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☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Credit any overpayments

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Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

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Other (e.g., late filing surcharge): **ISSUE FEE (\$720.00) & PUBLICATION FEE (\$300.00)**

Fees Paid (\$)**\$1,020.00**

SUBMITTED BY

Signature

Registration No. **35,907**

Telephone **914-969-2992**

Name (Print/Type) **RAYMOND A. JOAO**

Date **9/30/08**

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PAGE 8/10 * RCVD AT 9/30/2008 10:03:01 AM [Eastern Daylight Time] * SVR:USPTO-EFXXF-5/42 * DNIS:2732885 * CSID:914 969 2992 * DURATION (mm-ss):01-24